



CDSMP Checklist for Site Coordinators

Try to discuss the following areas regarding CDMP coordination during the master trainer's session:

Recruitment

- ◆ Refer trainees to handout: Tips for Recruitment of Peer Leaders and Class Participants
- ◆ Role of recruiters: varies with target population. Potential participants, however, should show some initiative and commitment.

Course and/or Training Locations

- ◆ Community-based sites (e.g., churches, community or senior centers, community clinics) often work better than hospitals.
- ◆ Wheelchair accessible, convenient parking, etc.

Time for Classes or Trainings

- ◆ Between 10:00 am and 4:00 pm weekdays.
- ◆ Some Saturday mornings or early afternoons, possibly Sunday evenings for Seventh Day Adventists.
- ◆ Consider holidays and seasons in your area (e.g., weather) when scheduling. Generally, fall and spring are good times.

Attendance

- ◆ Have some flexibility. If participants will miss 1st session, it is okay to start on 2nd session.
- ◆ Encourage participants that at time of registration they should plan to attend the whole course (e.g., don't register if participant will be out of town for most of the sessions, put on waiting list for future class).
- ◆ Keep attendance records.

Site Coordinator's Role and Availability

- ◆ Don't wait more than a half-day to call leader back when they call in.
- ◆ If you are out, designate someone to provide backup for you, or leave a message stating that on your voice mail or with someone else. Contact person for leaders should be trained as CDSMP leader.
- ◆ Support peer leaders as much as you can. Recognize their efforts, make them feel valued and respected.
- ◆ Provide meetings with leaders 2-3 times a year to discuss the program, update on changes, socialize, etc.
- ◆ Provide peer leaders with names and numbers of various community resources.

Checklist for Site Coordinators continued

Working with Leaders

- ◆ Refer to handout: *Guidelines for Program and Coordination – Leaders Issues*
- ◆ How do you know if a leader is doing a good job?
 - Feedback from leaders
 - Feedback from participants
 - Observe classes periodically (avoid first and last session)
- ◆ Leader behavior that is NOT allowed.
 - Selling products
 - Advocating a favorite home remedy or alternative treatment
 - Doctor bashing
 - Deliberately adding or omitting course activities
- ◆ Assigning leaders (always paired teaching).
 - Pair stronger with weaker (sometime may use a third leader)
 - Experienced with less experienced
 - Two peer leaders, if possible, with at least one with a chronic condition
 - If two peer leaders not possible, then a health professional with peer person with chronic condition

Other Considerations

- ◆ Name of course
- ◆ Charge for course
- ◆ Policy about allowing opening program up to community at large
- ◆ Diagnoses to target/consider
- ◆ Age of attendees
- ◆ Payment/stipend to peer leaders
- ◆ How to integrate program into the larger organization/community?
- ◆ How to evaluate class, dissemination efforts in your area, etc.?